

DETAILED ACTION

Notice of Amendment

1. In response to the amendment filed on 04/16/2007, amendment(s) to the specification, amended claim(s) 4-6, 8, and 9, and canceled claim(s) 1-3 is/are acknowledged. The current rejections of the claim(s) is/are *withdrawn*. The following is/are set forth:

Drawings

2. The drawings were received on 04/16/2007. These drawings are acceptable.

EXAMINER'S AMENDMENT

3. An examiner's amendment to the record appears below. Should the changes and/or additions be unacceptable to applicant, an amendment may be filed as provided by 37 CFR 1.312. To ensure consideration of such an amendment, it **MUST** be submitted no later than the payment of the issue fee.

Authorization for this examiner's amendment was given in a telephone interview with John Choate on 2/4/2009.

The application has been amended as follows:

Claim 4 should read as follows:

4. A method for testing and preventing the onset of symptoms of nerve pathology, improving discovery of cancer mass and reducing inflammation, the method comprising

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the steps of: A) identifying the subject's nerve pathology by diagnostic tests; B) identifying the subject's base line physical condition by inspection or examination tests; C) conducting the base line physical condition tests; D) providing the subject a tool; E) selecting exercises as uses of the tool to maximize inflammation in the structures adjacent to the nerve; F) instructing the subject on a use of the tool to maximize inflammation in the structures adjacent to the nerve; G) instructing the subject on self reporting of pain, tingling, decrease or change of feeling; H) instructing the subject to perform the self reporting; I) the subject performs the self reporting; J) instructing the subject on exercises of the tool to maximize inflammation; K) instructing the subject to perform the exercise of the tool to maximize inflammation; L) the subject performs the exercise; M) repeat steps C, H and I; N) adjourning the testing while awaiting the return of the subject to the base line physical conditions in step B; O) selecting exercises as uses of the tool to minimize inflammation in the structures adjacent to the nerve; P) repeat steps C, H and I; Q) instructing the subject on a use of the tool to minimize inflammation in the structures adjacent to the nerve; R) instructing the subject to perform the exercise of the tool to minimize inflammation; S) the subject performs the exercise; T) repeat steps C, H and I; U) identify number of tests to conduct to obtain statistically reliable and reproducible results; V) identify number of subjects to test to obtain statistically reliable and reproducible results; W) alternate between steps E to M and O to T to blind the results; X) conduct, preserve, protect and record all steps as necessary with sufficient tests, subjects, and alternates to obtain meaningful data; Y) establish end points for the data; and Z) calculate the statistical deviations necessary to

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compare the end points tools, wherein the data is used to establish an effectiveness of the tool at minimizing inflammation in the structures adjacent to the nerve.

Claim 6 should read as follows:

6. The method of claim 4, wherein the exercises and use of the tool, includes any or all:

- 1) to increase inflammation requires maximum repetitive flexion use, that is extension ~~(straightening)~~ and flexion ~~(bending at the first and second knuckles or finger joints)~~ of the fingers; 2) to increase inflammation includes typing on the QWERTY layout keyboard or typewriter, or on any keyboard wherein the majority of usage of letters is away from the home row, the ball or track mouse data entry peripheral and the one ~~(single or multiple)~~ hand finger pad arrangement of numerals 0 through 9; 3) to prolong the increase of inflammation or decrease inflammation requires minimum repetitive flexion use; 4) to prolong the increase of inflammation or decrease inflammation includes typing on the AsInRedHot, Dvorak, keyboard or any efficient keyboard with the letter E on the home row, use of a drafting board, internal consumption of aspirin or any anti-inflammatory drug or medicine, section of the transverse carpal ligament, or any exercise; wherein the tools includes a wrist brace, a chair, a table, a typewriter, a light, a v[V]ideo d[D]isplay t[T]erminal, or any similar binding, sitting, supporting, communicating, illuminating, and displaying equipment.

Claim 8 should read as follows:

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8. The method of claim 4, wherein the nerve comprises the median nerve and the structures which move, exercise, irritate, or contact, adjacent to the nerve include the nine flexor tendons next to the median nerve.

Claim 9 should read as follows:

9. The method of claim 4, wherein ~~the~~ work of any or all of the nine flexor muscles next to the median nerve is shifted to the lumbricals of the fingers, the dorsal interossei of the hand, and the volar ~~(aka palmar)~~ interossei muscles.

Claim 11 should read as follows:

11. The method of claim 4, wherein the base line physical condition by inspection or examination tests includes any or all, identifying the patient's name, address, phone, age, referring Health Care Professional, Health History, background data on carpal tunnel syndrome ~~(or CTS)~~ or cancer, gender, prior diagnosis, hands/fingers night tingle ~~(paresthesia')~~ or pain, braces or special support on hands or arm, pain relievers, prior nerve conduction velocity study, heart trouble, chest pain, fainting or dizziness, hand or finger therapy~~THERAPY~~, bone/joint problem, arthritis, physical reason to avoid exertion, number of fingers used in activities, prior surgery~~SURGERY~~, prior hospitalization, high blood pressure, swelling or any vascular disease, asthma/bronchitis ~~(pulmonary disease)~~, abnormal blood lipid or sugar levels, medications, allergy drugs, pain relievers, nonsteroidal anti-inflammatory drugs~~NSAIDS~~, steroids, anti-inflammatories, Prednisone, pills, caffeine, alcohol, tobacco, multi-vitamins, dietary supplements,

coronary disease, sudden death, heart disease, diabetes, cancer, pregnancy, menstruation, steroid injection, metabolic rate of discharge of drugs, with provisions to update the answers if they change, and instructions to avoid any pain relievers for times before each typing activity.

Allowable Subject Matter

4. Claims 4-12 are allowed.
5. The following is an examiner's statement of reasons for allowance: the prior art does not disclose, teach, and/or fairly suggest a method comprising the steps of *inter alia*: identifying a subject's nerve pathology, identifying a subject's base line physical condition, providing a tool to the subject, instructing the subject to use the tool to maximize inflammation to the nerve by exercise while performing self reporting, adjourning testing while awaiting a return to the base line physical condition, instructing the subject to use the tool to minimize inflammation to the nerve by exercise while performing self reporting, identifying statistically reliable data regarding the tests by blinding the results and establishing end points, and comparing the results to establish an effect of the tool at minimizing inflammation.

Any comments considered necessary by applicant must be submitted no later than the payment of the issue fee and, to avoid processing delays, should preferably accompany the issue fee. Such submissions should be clearly labeled "Comments on Statement of Reasons for Allowance."

Conclusion

6. The prior art made of record and not relied upon is considered pertinent to applicant's disclosure. The citations on the accompanying PTO-892 are related prior art.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to JEFFREY G. HOEKSTRA whose telephone number is (571)272-7232. The examiner can normally be reached on Monday through Friday 8am to 5pm.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Max Hindenburg can be reached on (571)272-4726. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

/Jeffrey G Hoekstra/
Examiner, Art Unit 3736

/Max Hindenburg/

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Supervisory Patent Examiner, Art Unit 3736